

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	PS	66621	10/4
O.I.P.E. CLASSIFIER		10	10-11-00
FORMALITY REVIEW		7072	11/8/00
RESPONSE FORMALITY REVIEW			

### INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral) ... Canceled  
 + ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date
Final	
Original	
1	6/23/00
2	6/23/00
3	6/23/00
4	6/23/00
5	6/23/00
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49	6/23/00
50	6/23/00

Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
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